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| | 2,359 |
| RE: Response to Non-Final Office Action No. of Pages: 16 | (including this cover sheet) |
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| In response to the Office Action dated08/25/2005, please find the followi | ng checked items: |
| ⊠ Cover letter, 1 sheet(s); | |
| Petition for Extension of Time Under 37 C.F.R. 1.136(a), Form PTO/SB/22 thereof attached thereto,1_ sheet(s); | 2, and one (1) copy |
| Example 17. Fee Transmittal, Form PTO/SB/17. 2 sheet(s); | |
| Response to Office Action (including attachments, if any), 10 sheet(s) | total; |
| Other: | |
| Other: | |
| Thank you. | |
| Certificate of Transmission Under 37 C.F.R. 1.8 The undersigned hereby certifies that a true and accurate copy of the items checked above are being transmitted to the Honorable Connitransmission to the facsimite number indicated above, on this the | nissioner for Pelents, by fecsimile |
| Michele L McRoy | I Mc Roy |

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RICHARD C. STEWART, II CHIEF COUNSEL INTELLECTUAL PROPERTY CINCINNATI TECHNOLOGY CENTER 6285 TRI-RIDGE BOULEVARD LOVELAND OH 45140

T 513.248.6079 F 513.248.6455 rich.stewart@ipaper.com

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|------------------------------|--|---|--|--|--|--|--|--|--|
| SENT | | AIL TO THE ADDRESS BELOW | | | | | | | |
| 08 De | cember 2005 | | PEDEIVED CENTRAL FAX CENTER | | | | | | |
| United Post 0 | Commissioner for Patents United States Patent and Trademark Office Post Office Box 1450 Alexandria, Virginia 22313-1450 | | | | | | | | |
| RE: | SUBMISSION OF RESPONS Applicant(s) : Wadood Hamad Serial No. : 09/522,359 Filed on : March 9, 2000 Title : Engineered Cra Our Ref. : TEC-6007-US | | | | | | | | |
| Dear (| Commissioner: | • | | | | | | | |
| Enclos | sed herewith for filing, Applicar | nt(s) respectfully submit(s) the following | checked items: | | | | | | |
| X | Petition for Extension of Time Under 37 C.F.R. 1.136(a), Form PTO/SB/22, and one (1) copy thereof attached thereto,1_ sheet(s); | | | | | | | | |
| X | Fee Transmittal, Form PTO/SB/17, 2 sheet(s); | | | | | | | | |
| X | Response to Office Action (including attachments, if any),10 sheet(s) total; | | | | | | | | |
| | Other:; | | | | | | | | |
| | Other: | | ; | | | | | | |
| | Postage-prepaid return-receipt postcard for your use in stamping to indicate receipt of the above-listed items. | | | | | | | | |
| Please listed i enclos | tems. Please feel free to conta | and return same to me to indicate you act me if you have any questions conce | r receipt of the above- erning the above or the | | | | | | |
| With k | ndest regards, | | | | | | | | |
| | d C. Stewart by for Applicant(s) | Certification of Mailing or Transmiss. The undersigned hereby certifies that a true and a sponse to Office Action*, together with all attachm transmitted to the Honorable Commissioner for Prostage prepaid, addressed to Commissioner for Alexandria, Virginia 22313-1450, or by facsimile to ber indicated hereon, on this the | accurate copy of the within "Re- nents referred-to herein, is being atents, either by first-class mail, Patents, Post Office Box 1450, ransmission to the facsimile num- | | | | | | |
| Enclos RCS/ | | Mech Michael Web | lele & McRay | | | | | | |

Under the Denament Particling Act of 1995, no necessary are

PTO/SB/17 (12-04v2) Approved for use through 07/31/2008. OMB 0851-0032
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| | Effective on 12/08/2004. Complete if Knov | | | | | ND |
|--|---|---|--|----------------|--------------------------|---------------------------|
| Fees oursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number 09/5 | | 522,359 | | | | |
| FEE IR | (AN) | SMITTAL | Filing Date | 03/ | 09/2000 | |
| l Fo | r FY 2 | 2005 | First Named Inv | rentor Wa | dood Hamad | et al. |
| <u> </u> | | 0.0000000 | Examiner Name |) L. F | erguson | CC171 |
| Applicant claims sma | ll entity stati | us. See 37 CFR 1.27 | Art Unit | 177 | | CHIR |
| TOTAL AMOUNT OF PAY | MENT (S | §) 450.00 | Attorney Docke | t No. TEC | C-6007-US | יח |
| METHOD OF PAYMEN | IT (check a | ili that apply) | | | | |
| Check Credit | Card | Money Order N | lone Other (p | lease identify | /): | |
| ✓ Deposit Account t | Deposit Accou | int Number: <u>09-0525</u> | Deposit Ac | count Name:_ | INTL PAPER | R CO |
| For the above-ident | ifled deposit | t account, the Director is | hereby authorized to | : (check all t | hat apply) | |
| ✓ Charge fee(s |) indicated t | elow | Charo | e fee(s) indi | cated below. ex | cept for the filing fee |
| Charge any a | additional fe | e(s) or underpayments o | · · · · · · · · · · · · · · · · · · · | • • | • | oopered me mmg |
| under 37 CF WARNING: Information on thi | R 1.16 and 1 | 1.17 | V Credit | any overpay | = | Ida asadik asad |
| information and authorization | | | iniomiauon snoulo ni | ot bu included | a on uns sonn. Fr | Ovide Cledit card |
| FEE CALCULATION | | | | | | |
| 1. BASIC FILING, SEAI | RCH, AND | EXAMINATION FEE | 3 | | | |
| | FILING | FEES SE | ARCH FEES | | TION FEES | |
| Application Type | Fee (\$) | Small Entity Fee (\$) Fee | Small Entity (\$) | Fee (\$) | Small Entity Fee (\$) | Fees Paid (\$) |
| Utility | 300 | 150 50 | | 200 | 100 | |
| Design | 200 | 100 10 | 0 50 | 130 | 65 | |
| Plant | 200 | 100 30 | 0 150 | 160 | 80 | |
| Reissue | 300 | 150 50 | | 600 | 300 | |
| Provisional | 200 | 100 | 0 0 | 0 | 0 | |
| 2. EXCESS CLAIM FEI | ES | | · | · | - | Small Entity |
| Fee Description | | | | | <u>Fee (\$)</u> | Fee (\$) |
| Each claim over 20 (including Reissues) | | | | 50 200 | 25 100 | |
| Each independent claim over 3 (including Reissues) Multiple dependent claims | | | | 360 | 180 | |
| Total Claims Extra Claims Fee (\$) Fee Paid (\$) Multiple Dependent | | | | | | |
| - 20 or HP = | | × <u>50.00</u> = _ | 250.00 | | Fee (\$) | Fee Paid (\$) |
| HP = highest number of total | | | on Boid (E) | | | |
| indep. Claims - 3 or HP = | Extra Clair | <u>ms </u> | ee Paid (\$) 200.00 | | | |
| HP = highest number of indep | | | | | | |
| 3. APPLICATION SIZE If the specification and | FEE | eveed 100 sheets of r | vaner (evoluding el | ectronicali | v filed consen | oce or computer |
| | |), the application size | | | | |
| sheets or fraction th | ereof. See | : 35 U.S.C. 41(a)(1)(C | i) and 37 CFR 1.16 | 5(s). | | |
| Total Sheets | Extra She | 150 | ach additional 50 or (round up to a w | | | \$) <u>Fee Paid (\$)</u> |
| 4. OTHER FEE(S) Non-English Specific | eation, \$1 | /50 = 130 fee (no small entit | | noic number | ^ | Fees Paid (\$) |
| Other (e.g., late filing | | • | | | | |
| | | | | | | |
| Ignature ()) | 00 | 717 | Registration No. | | Telephon | ^e 513-248-6079 |
| ignature (| (| | (Attorney/Agent) 28 | 5,047 | | |
| lame (Print/Type) Richard C. | Stewart II | | | | Date 12/1 | 2/2005 |

This collection of Information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the including case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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